AUG 0 3 2005

PART B - FEE(S) TRANSMITTAL

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being faosimited to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's nume)	Beborah Press	
(Slgnanure)	- Land Trao	
(Date)	August 3, 2005	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/604.121	06/26/2003	Albert Kabemba	1372.39	1120	

TITLE OF INVENTION: THERAPEUTIC MATTRESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	SO	\$700	08/03/2005
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FR 1.363). Change of correspon Address form PTO/S6/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	ntion (or "Fee Address" Indic or more recent) attached. Us O RESIDENCE DATA TO	Correspondence or (2 alion form re of a Customer 2 lis	For printing on the patent front page,) the names of up to 3 registered pauragents OR, alternatively,) the name of a single firm (having as gistered automey or agent) and the name of a single firm (having as gistered automey) and the name in the single of the single	a member a 2 Smit mes of up to f no name is 3	th & Hopen, P
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEBS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

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U.\$. F	atent & Trademo	ark Office	From:	Michael M. McGo	ow
Mail	Stop Issue Fee		Client:	1372.39	
(703)	746-4000		Pages:	4 including coversheet	
			Date:	August 3, 2005	
US\$N	10/708,710	<u></u>	CC:	University of South Florida (Assignee)	
nt	☑ For Review	□ Please Com	ment	☐ Please Reply	□ Please Recycle
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Dear Sir:

In response to the Notice of Allowance mailed May 3, 2005, we enclose the following:

- 1) Transmittal of Payment of Issue Fee with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated August 3, 2005 (1 page);
- 2) Form PTOL-85 (1 page); and
- 3) Credit Card Payment Form PTO-2038 in the amount of \$700.00 (1 page).

Very respectfully,

Michael M. McGaw Reg. No. 53,296 AUG 0 8 2005 BY: _____

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Practitioner's Docket No: 1372.39

PATENT.

0 3 2005 DUA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Application of: Albert Kabemba

TRADEM

Serial No.: 10/604,121

Filed: 06/26/2003

For: Therapeutic Mattress

Faxed to (703) 746-4000 Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 C.F.R. 1.311)

1. Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85.

2. Fee (37 C.F.R. 1.18(a)):

Fee

Application status is Small Entity—fee:

\$700.00

Art Unit: 3673

Confirmation No. 1120

Examiner: Michael Safavi

3. Payment of fee:

Enclosed please find Credit Card Payment Form PTO-2038 for \$700.00

Michael M. McGaw

Suite 220

15950 Bay Vista Drive Clearwater, FL 33760

Reg. No. 53,296

Tel. No.: (727) 507-8558

CERTIFICATE OF FACSIMILE TRANSMISSION

(37 C.F.R. 1.8(a))

I HEREBY CERTIFY that this correspondence and payment is being transmitted to the United States Patent and Trademark Office by facsimile to (703) 746-4000 on August 3, 2005.

Dated: August 3, 2005

Deborah Preza